Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Coturns 1) (Cotumn 2) RATE (S) NUMBER EXTRA FEE (S) FEE (S) NUMBER FILED RATE (S) FOR BASIC FEE (37 OFR 1.16(4), (6), 0° (4) . NA NA NA SEARCH FEE N/A NA NVA (37 CFR 1.16(k), (1) ar (m)) **EXAMINATION FEE** NA N/A NA N/A (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(1)) 20 minus 20. INDEPENDENT CLAIMS 3 minus 3 . (37 OFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each editional 50 sheets or fraction thereof. See (37 CFR 1,16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160)) NA TOTAL TOTAL If the difference in column 1 is less than zero, enter 'O' in column 2. APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 1) HIGHEST CLAIMS RATE (S) ADDI-PRESENT RATE (\$) ADOL-REMANING TIONAL FEE (\$) TIONAL PREVIOUSLY PAID FOR **EXTRA** AFTER FEE (\$) ENT AMENDMENT 20 Minus 2C 50 OR ENDM 200 OR. Application Stre Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1:18(1)) OR N/A NVA TOTAL TOTAL ADOL FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-RATE (\$) ADOI-PRESENT RATE (S) NUMBER PREVIOUSLY TIONAL FEE (S) REMAINING d TIONAL AFTER FEE (\$) PAID FOR Total Or CPR 1.160 ۵ Independent OR Z Application Size Fee (37 CFR 1.16(1)) AUA FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (OT CFR 1.18(1)) N/A TOTAL TOTAL ADD'L FEE OR ADO'L FEE If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to 64e (and by the This collection of information is required to obtain or retain a benefit by the public which is to 64e (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments in the emount of time you require to complete this form end/or suggestions for reducing this burden, should be earl to the Chief Information Officer, U.S. Peterm on the emount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peterm on the emount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peterm on the emount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peterm on the emount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to be called the Chief Information Officer, U.S. Peterm on the emotion of time to the USPTO in the emotion of time to the USPTO in the emotion of time to the time to the USPTO in the emotion of time to the USPTO in the USPTO in the emotion of time to the USPTO in the emotion of time to the USPTO in the emotion of time to the USPTO in the emotion of the USPTO in the emotion of the USPTO in the

if you need essistance in completing the form, cell 1-800-PTO-9199 and select option 2